

cc: Maywood USEPA



JHK

## **CITGO Petroleum Corporation**

P.O. Box 3758 Tulsa OK 74102-3758

April 22, 1997

US EPA RECORDS CENTER REGION 5



Certified Mail - Z095457860 Return Receipt Requested

Mr. Edward Bakowski Manager Permit Section Illinois Environmental Protection Agency 1001 North Grand Avenue East Springfield, IL 62702

RE: Change of Ownership
Modified Part A Permit Application
Land Treatment Facility
EPA I.D. # ILD041550567
Will County

APR 2 R 1997

Dear Mr. Bakowski:

Attached is a revised Part A Permit Application for the above referenced facility. The ownership of this facility will transfer from the UNO-VEN Company to PDV Midwest Refining L.L.C. on May 1, 1997. The facility will be operated by CITGO Petroleum Corporation.

Facility maps, drawings and pictures are not included with this application because these have not changed since the last Part A Application was submitted. If you have any questions or need additional information, please contact Mr. Claude Harmon at (630) 257-4450.

Sincerely,

Jerry E. Thompson Vice President

Please print or type with ELITE type (12 cha	only	OMB No. 2050-0034 Expires 9-30-96 GSA No. 0248-EPA-OT	
For EPA Regional	· ALL PEPA	Company of the Section 1	
Use Only	United States Environmental Protect		
	Washington, DC 20460		
100000	Hazardous Waste		
Date Received	Application	1	
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A. First Part A Submission	X B	Part A Amendment #	7 ADA 28 1997
C. Installation's EPA ID Number	D. Secondary ID Num	per (If applicable)	8 1997
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III. Facility Location (Physical address	not P.O. Box or Route Number)		
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IV. Facility Mailing Address			
Street or P.O. Box			<del></del>
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City or Town		State Zip Code	
V. Facility Contact (Person to be conta		lity)	
Name (Last)	(First)	<del></del>	
H A R M O N		A U D E	
Job Title	Phone Nu	mber (Area Code and Number)	
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### XI. Nature of Business (Provide a brief description)

- Petroleum refining and related activities.
- Process crude oil to finished petroleum products such as gasoline, diesel В. and fuel oils.

#### XII. Process Codes and Design Capacities

- PROCESS CODE Enter the code from the list of process codes below that best describes each process to be used at the facility. Thirteen lines are provided for entering codes. If more lines are needed, attach a separate sheet of paper with the additional information. For "other" processes (i.e., D99, S99, T04 and X99), describe the process (including its design capacity) in the space provided in Item XIII.
- B. PROCESS DESIGN CAPACITY For each code entered in column A, enter the capacity of the process.

  1. AMOUNT Enter the amount. In a case where design capacity is not applicable (such as in a closure/post-closure or enforcement action) enter the total amount of waste for that process.

  2. UNIT OF MEASURE For each amount entered in column B(I), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

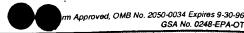
  C. PROCESS TOTAL NUMBER OF UNITS Enter the total number of units used with the corresponding process code.

PROC	CESS E PROCESS	MEASUR	PRIATE UNITS OF TE FOR PROCESS GN CAPACITY	PROG COD		OCESS	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
D79 D80 D81 D82 D83 D99 S01 S02 S03 S04 S05 S06	Disposal: Underground Injection Landfill Land Treatment Ocean Disposal Surface Impoundment Other Disposal Storage: Container (Barrel, Drum, Etc.) Tank Waste Pile Surface Impoundment Drip Pad Containment	or Liters Per Acres or Hec Gallons Per I Gallons or Li Any Unit of M Gallons or Li Cubic Yards Gallons or Li Gallons or Li Gallons or Li	Hectare-meter tares tares ters ters Heasure Listed Below ters ters ters or Cubic Meters	T87 T88 T89 T90 T91 T92 T92	Smelting, Me Or Refining Intanium Dio Chloride Pro Oxidation Re Methane Refigure Pulping Liquing Ecovery Full Combustion Used In The Of Sulfur Val Spent Sulfur Induces Us 40 CFR §260.	Furnace pxide pxid	Gallons Per Day; Liters Per Day; Pounds Per Hour; Short Tons Per Hour; Kilograms Per Hour; Metric Tons Per Day; Metric Tons Per Hour; Short Tons Per Day; or Btu's Per Hour
<i>599</i>	Building-Storage Other Storage Treatment:	Any Unit of M	leasure Listed Below	T94	Containment Building-Tree	1	Cubic Yards or Cubic Meters
T01 T02 T03 T04	Tank Surface Impoundment Incinerator Other Treatment	Gallons Per L Short Tons Po Per Hour; Gal Per Hour; or I Gallons Per D Pounds Per H Hour; Kilogra Tons Per Day Hour; Short T	Day or Liters Per Day Day or Liters Per Day Der Hour; Metric Tons Blu's Per Hour; Day; Liters Per Day; Dour; Short Tons Per TIS Per Hour; Metric Der Hour; Metric Hotric Tons Per Ons Per Day; or	X01 X02 X03	Miscellaneou Open Burning Detonation Mechanical P Thermal Unit	Processing	Any Unit of Measure Listed Below Short Tons Per Hour; Metric Tons Per Hour; Short Tons Per Day; Metric Tons Per Day; Pounds Per Hour; or Kilograms Per Hour Gallons Per Day; Liters Per Day; Pounds Per Hour; Short
T83 T84 T85	Boiler Cement Kiln Lime Kiln Aggregate Kiln Phosphate Kiln Coke Oven Blast Furnace	Pounds Per H Hour; Kilogra Tons Per Day:	ers ay; Liters Per Day; our; Short Tons Per ms Per Hour; Metric : Metric Tons Per ons Per Day; or	X04 X99	Geologic Rep Other Subpar		Tons Per Hour; Kilograms Per Hour; Metric Tons Per Day; Metric Tons Per Hour; Short Tons Per Day; or Btu's Per Hour Cubic Yards or Cubic Meters Any Unit of Measure Listed Below
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- A. EPAHAZARDOUSWASTENUMBER Enter the four-digit number from 40 CFR, Part 261 Subpart D of each listed hazardous waste you will handle. For hazardous wastes which are not listed in 40 CFR, Part 261 Subpart D, enter the four-digit number(s) from 40 CFR, Part 251 Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.
- B. ESTIMATED ANNUAL QUANTITY For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.
- C UNIT OF MEASURE For each quantity entered in column B enter the unit of measure code, Units of measure which must be used and the appropriate codes are:

Π	ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
	POUNDS	P	KILOGRAMS	κ
	TONS	τ	METRIC TONS	М

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

#### D. PROCESSES

#### 1. PROCESS CODES:

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item XII A. on page 3 to indicate how the waste will be stored, treated; and/or disposed of at the facility.

For non-listed hazardous waste: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in item XII A, on page 3 to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

NOTE: THREE SPACES ARE PROVIDED FOR ENTERING PROCESS CODES. IF MORE ARE NEEDED:

- Enter the first two as described above
- 2. Enter "000" in the extreme right box of item XIV-D(1).
- Enter in the space provided on page 7, Item XIV-E, the line number and the additional code(s).
- 2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form (D.(2)).

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER - Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

- Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns. B, C and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
- In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
- 3. Repeal step 2 for each EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM XIV (shown in line numbers X-1, X-2, X-3, and X-4 below) - A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

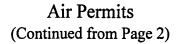
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ANNUAL C. UNIT OF MEASURE (Enter code) D. PROCESSES \* (1) PROCESS CODES (Enter code) (2) PROCESS DESCRIPTION (If a code is not entered in D(1)) K 0 None API Separator Sludge Note: This unit is commencing closure under a post closure care permit No hazardous waste has been applied to this unit since 1981. 

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XV. Map	
Attach to this application a topographic map, or other equivalent map, of the area extension boundaries. The map must show the outline of the facility, the location of each of its estructures, each of its hazardous waste treatment, storage, or disposal facilities, and estinctude all springs, rivers and other surface water bodies in this map area. See instructions for the surface water bodies in this map area.	ixisting and proposed intake and discharge each well where it injects fluids underground.
All existing facilities must include a scale drawing of the facility (see instructions for m	nore detail).
(VII. Photographs	
All existing facilities must include photographs (aerial or ground-level) that clearly delic treatment and disposal areas; and sites of future storage, treatment or disposal areas (	ineate all existing structures; existing storage (see instructions for more detail).
VIII. Certification(s)	
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#### **Permit Number Description** 72110245 Catalytic Reformer #2 72110246 Saturated Gas Plant Aliphatic Naphtha Solvents Unit 72110247 72110248 Sulfur Unit 72110250 **Aromatics Extraction Unit** 72110251 Catalytic Reformer #1 Unit 72110252 Diesel Distillate Unionfiner 72110253 Refinery Utilities 77020010 Sulfur Recovery 80060039 **Product Loading Facilities** Needle Coker Complex 83010013 84090004 Alkylation Unit 85090012 **Isomerization Complex** 88010019 Barge Terminal Hydrocarbon Recovery (Desalter) 92120040 94110029 Electrostatic Precipitator Reformulated Gasoline Project 95030064 95040127 Vacuum Heater 96100016 Temporary Package Boiler

CAAPP (Title V) Permit Application

96030079

A CONTRACTOR OF THE STATE OF TH	-				Furm Approved OMB Va. 1	58-P(	)175	
FURM			-	ATION	I. EPA I.D. NUMBER			
SEPA ·	onsoli	da teo	l Permits P	rogram	FILD04155	0 !	5 6	7
GENERAL (Read the	Gener	al In	structions	before starting.)	GENERAL INSTR	_		
I. EPA I.D. NUMBER					If a preprinted label has be it in the designated space.	Revie	w the	infor:
ILD 041550		_		obt D. fin	ation carefully; if any of it through it and enter the			
The UNO-VI				Chicago Refinery	appropriate fill—in area bel the preprinted data is abse			
V. MAILING ADDRESS Lemont, I					left of the label space list that should appear), please	ts th	e info	o <i>rmati</i> c
					proper fill—in area(s) belo complete and correct, you	w. 11	the	label
135th Stre Lemont, I					Items I, III, V, and VI for must be completed regard	эхсөр	t VI-	B which
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LOCATION					tions and for the legal at			
					which this deta is collected.		استعد	
II. POLLUTANT CHARACTERISTICS					forms to the EDA If you are		vae <sup>m</sup> (	20.00
INSTRUCTIONS: Complete A through J to determine questions, you must submit this form and the supplement if the supplemental form is attached. If you answer "no is excluded from permit requirements; see Section C of the	ntal fo "to e	rm ! ach d	isted in the Juestion, y	e parenthesis following the que ou need not submit any of the	stion. Mark "X" in the box in se forms. You may answer "no	the th " if y	vird co	nmula
SPECIFIC QUESTIONS	VES	MAF	FORM ATTACHED	SPECIFIC C	DUESTIONS	YES	MAR	K 'X'
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S. (FORM 2A)		х		include a concentrated	(either existing or proposed) enimal feeding operation or on facility which results in a 11 \$ 2 (FORM 2R)		х	
C. Is this a facility which currently results in discharge	16	17	10	D. Is this a proposed facility	(other than those described	19		31
to waters of the U.S. other than those described in A or 8 above? (FORM 2C)		h	24	waters of the U.S.? (FOR		10	X 25	27
E. Does or will this facility treat, store, or dispose on hazardous wastes? (FORM 3)	LX		х	municipal effluent below taining, within one que	at this facility industrial or with lowermost stratum con- arter mile of the well bore, Irinking water? (FORM 4)	-11	X	33
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface		39	30	H. Do you or will you injec	t at this facility fluids for spe-	<del>  "</del>		
in connection with conventional oil or natural gas pro duction, inject fluids used for enhanced recovery o	-}	X		process, solution mining	ining of sulfur by the Frasch of minerals, in situ combus-		X	
oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)	<b>4</b>	L_		tion of fossil fuel, or red (FORM 4)	covery of geothermal energy?			
I. Is this facility a proposed stationary source which in one of the 28 industrial categories listed in the in	•	75	36		ed stationery source which is	37	38	30
structions and which will potentially emit 100 ton	•			instructions and which v	ustrial categories listed in the vill potentially emit 250 tons	l		
per year of any air pollutant regulated under the Clean Air Act and may affect or be located in all	n	X		Air Act and may affect (	tant regulated under the Clean or be located in an attainment		×	
attainment aree? (FORM 5) III. NAME OF FACILITY	46	41	48	area? (FORM 5)		43	44	41
1 SKIP The UNO-VEN Compan								
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IV. FACILITY CONTACT	first. &	title		<u></u>	. PHONE (area code & no.)			
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V. FACILITY MAILING ADDRESS  A. STREET OR P.O.								
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B. CITY OR TOWN	<del></del>	<del></del>	<del></del>	C.STATE D. ZIP CO	9			
VL FACILITY LOCATION				म संस्थित	Ter T			
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C. CITY OR TOWN		1	<del></del>	D.STATE E. ZIP CO	DE F. COUNTY CODE			
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EPA Form 3510-1 (6-80)			······································	49   141   42   147	CONTI	NUE	ON R	EVER

CONTINUED FROM THE FRONT			
VII. SIC CODES (4-digit, in order of priority)			
A. FIRST			OND
2 9 1 1 (specify) Petroleum Refining	7	(specify)	
· Section C. THIRD	nilie :	D. FOL	JRTH
(specify)	<u>er i</u>	(specify)	
1 10 10 10	7		
VIII. OPERATOR INFORMATION			
	A. NAME		B. Is the name listed is Item VIII-A also th
The UNO-VEN Company, Chicago Ref		11111111	owner?
A STATE OF THE RESIDENCE OF THE PARTY OF THE			YES NO
9 44	es laster from the array on hour 16 ff	Debanii anadin l	D. PHONE (erea code & no.)
C. STATUS OF OPERATOR (Enter the appropriat  F = FEDERAL M = PUBLIC (other than federal		riner , specify.)	
S = STATE = 0 = OTHER (specify) P = PRIVATE	P	A	7 0 8 2 5 7 7 7 6 1
MAN POST TO THE PROPERTY OF P.O.	#OX 3,1	191-1	
35th Street and New Avenue		99	
F. CITY OR TOWN	G.1	STATE H. ZIP CODE (X, IN	DIAN LAND
lemont	· · · · · · · · · · · · · · · · · · ·		facility located on Indian lands?
Lemont			JYES W NO
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C WCRA (Hazerdous Wastes)	E. OTHER (specify)	And the second	
R 9		(specify)	
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(I. MAP			
Attach to this application a topographic map of the outline of the facility, the location of each of	he area extending to at least o	me mile beyond property b	ounderies. The map must show
treatment, storage, or disposal facilities, and each	h well where it injects fluids	underground. Include all s	prings, rivers and other surface
water bodies in the map area. See instructions for			
IL NATURE OF BUSINESS (provide a brief description			
A - Petroleum refining and relate	ed activities.		
, constant of thing and to the			
B - Process crude oil into finish	hed petroleum product	ts such as gasoline	e, fuel oils and
other miscellaneous products	•		
CIII. CERTIFICATION (see Instructions)			
I certify under penalty of law that I have person	ally examined and are familia	e with the information sub-	nitied in the application and alf
ettechnents and that based on my inquiry of	those persons immediately	responsible for obtaining the	e information contained in the
application, I believe that the information is true false appropriation, including the possibility of fine		en eviers that there are sig	niticant pandities for submitting
NAME & OFFICIAL TITLE (type or print)			C DATE SIGNED
***	B SIGNATURE		C. DATE STORED
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C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T94"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

The surface impoundment is an integral-part of the wastewater treatment system at the facility which operates under an NPDES permit (No. IL 0001589). All the flows through the impoundments eventually discharge through two points, both regulated under the NPDES permit. The process design capacity is based on an estimated flow of 5 million gallons per day through the wastewater treatment plant at the facility or recycled into the plant cooling water system.

### IV. DESCRIPTION OF HAZARDOUS WASTES

- A. EPA HAZARDOUS WASTE NUMBER Enter the four—digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four—digit number/s/ from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.
- B. ESTIMATED ANNUAL QUANTITY For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste/s/ that will be handled which possess that characteristic or contaminant.
- C. UNIT OF MEASURE For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE CODE
POUNDS		KILOGRAMS
TONS	<b>. T</b>	METRIC TONS

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

#### D. PROCESSES

1. PROCESS CODES:

For listed hazardous waste: For each listed hazardous waste entered in column A select the code is, from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code/s/ from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes, If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number as the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

- 1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B,C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the leasts.
- 2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to \_-scribe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
- 3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

	Т	A. EPA					C. UNIT												D. PROCESSES		
NO NO		HAZARD. B. ESTIMATED ANNUAL WASTENO (enter code)				5	UR ent	E				1.	PF			ss c ter)	) E S			2. PROCESS DESCRIPTION (if a code la not entered in D(1))	
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E. USE THIS SPACE TO LIST ADDITIONAL PRO	OCESS CODES FRO	M ITEM D(1) ON PAG	SE 3.	
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12 14 13				
V. FACILITY DRAWING  All existing facilities must include in the space provided or	n nage 5 a scale drawing	of the facility (see instru	ctions for more deta	
VI. PHOTOGRAPHS	, page 5 to today di atting	or the identity jobs many		
All existing facilities must include photographs (ae.				
treatment and disposal areas; and sites of future sto	orage, treatment or d	lisposal areas (see instr	uctions for more o	letail).
VII. FACILITY GEOGRAPHIC LOCATION  LATITUDE (degrees, minutes, & second	de)	LONG	TUDE (degrees, mir	utes & seconds
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VIII. FACILITY OWNER				
A. If the facility owner is also the facility operator as skip to Section IX below.	s listed in Section VIII o	on Form 1, "General Info	rmation", place an "	X" in the box to the left and
		<b>-</b> . • • • • •		
B. If the facility owner is not the facility operator as	listed in Section VIII o	n Form 1, complete the	plowing items:	
	ILITY'S LEGAL OWN	ER		2. PHONE NO. Jarea code & no.
Ē				
3. STREET OR P.O. BOX	1	4. CITY OR TOWN	55. IS	T
F	Ĝ			
12 1.16	49 15 19		40 41 4	2 47 21
IX. OWNER CERTIFICATION	, averaged and am	Samilies with the info	j	in this and all attached
I certify under penalty of law that I have personally documents, and that based on my inquiry of those	y exammeu anu am i individuals immedia	ammar with the linc. tely responsible for co	caining the inform	nation, I believe that the
submitted information is true, accurate, and compl	lete. I am awar <mark>e</mark> that	there are significant $arepsilon$	enalties for submi	ting false information,
including the possibility of fine and imprisonment.	······································			
A. NAME (print or type) J. K. Bassett	B. SIGNATURE	$\mathcal{A}$	C. 0	DATE SIGNED
General Manager	John K	Daned		5 MAR 91
X, OPERATOR CERTIFICATION	*			
I certify under penalty of law that I have personall	y examined and am i	familiar with the infor	mation submitted	in this and all attached
documents, and that based on my inquiry of those submitted information is true, accurate, and comp	individuals immedia	tely responsible for or	taining the inforn	nation, I believe that the
including the possibility of fine and imprisonment.		there are significant p	enarcies for scottiff	ung raise unormation, Age
A. NAME (print or type)	B SIGNATURE	1 ^	c. i	DATE SIGNED
J. K. Bassett	1.5 A 1	Als w		- uanal
General Manager	1 John 1	11/11/11/11/11	} ,	5 MAR91

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EPA Form 3510-3 (6-80)

See attached Figures A-1 and A-2

A-1: Facility Location Map

A-2: Facility Base Map

UP3/14/91

DACE 5 OF



CERTIFIED MAIL
RETURN RECEIPT REQUESTED
P 474 913 714

The UNO-VEN COMPANY Chicago Refinery 135th Street & New Avenue Lemont, Illinois 60439-3659

Telephone (708) 257-7761

BECERVE

OCT 1 8 1990

October 15, 1990

U. S. EPA, REGION V SWB — PMS

U.S. Environmental Protection Agency RCRA Activities Region 5 P.O. Box A3587 Chicago, IL 60690

Dear Sir or Madam:

Revised RCRA Part A Permit Application - ILD041550567

Attached is a revised RCRA Part A permit application for a surface impoundment located at UNO-VEN, Chicago Refinery which becomes a regulated unit due to the TC Rule.

Very truly yours,

W. F. Busse, Supervisor Environmental Services

LDE/1s

See attached Figures A-1 and A-2

A-1: Facility Location Map

A-2: Facility Base Map

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	ERAL INFORM	1 (, 25 8	U.D. NUMBER	
YEFA CO	nsolidated Permits Pr General Instructions"	ogram F	ILD 041550567	
GENERAL Read the "C	Jeneral Instructions		GENERAL INSTRU	
I. EPA I.D. NUMBER ILD 041550567		it in	preprinted label has be the designated space. F	leview the inform-
III. FACILITY NAME THE UNO-VEN CO	ompany, Chica	go Refinery	carefully; if any of it	is incorrect, cross priect data in the
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II. POLLUTANT CHARACTERISTICS INSTRUCTIONS: Complete A through J to determine w	hather you peed to	when t any posmit poplination forms	to the EPA If you answ	ver "ves" to any
questions, you must submit this form and the supplemen if the supplemental form is attached. If you answer "no" is excluded from permit requirements; see Section C of the	tal form listed in the to each question, ye	parenthesis following the question. It is need not submit any of these form	Mark "X" in the box in t s. You may answer "no"	ne third column if your activity
SPECIFIC QUESTIONS	MARK X	SPECIFIC QUEST	IONS	MARK X
A. Is this facility a publicly owned treatment works	ATTACHED	B. Does or will this facility (either		
which results in a discharge to waters of the U.S.? (FORM 2A)	X	include a concentrated animal aquatic animal production facil	ity which results in a	X
C. Is this a facility which currently results in discharges	16 17 18	discharge to waters of the U.S.?  D. Is this a proposed facility (other		19 20 21
to waters of the U.S. other than those described in A or 8 above? (FORM 2C)	X 23 24	in A or B above) which will rewaters of the U.S.? (FORM 2D)		25 26 27
E. Does or will this facility treat, store, or dispose of		F. Do you or will you inject at the municipal effluent below the lo	is facility industrial or	
hazardous wastes? (FORM 3)	X X	taining, within one quarter in underground sources of drinking	nile of the well bore,	X
G. Do you or will you inject at this facility any produced	28 29 30	H. Do you or will you nject at thi		31 32 33
water or other fluids which are brought to the surface in connection with conventional oil or natural gas pro-	X	cial processes as mining of	of sulfur by the Frasch nerals, in situ combus-	x
duction, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid	Α.	tion of fossil fun or recovery	of geothermal energy?	
hydrocarbons? (FORM 4)  Is this facility a proposed stationary source which is	34 38 36	J. Is this facility posed stat	ionary source which is	37 38 19
one of the 28 industrial categories listed in the in- structions and which will potentially emit 100 tons	X	NOT one of the 3 industrial	categories listed in the tentially emit 250 tons	X
per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an		per year of any an collutant reg Air Act and may affect or be to	julated under the Clean	
attainment area? (FORM 5)	40 41 42	arse? (FORM 5)		43 44 45
1 SKIP The UNO-VEN Company, Chicago	Refinery	· · · · · · · · · · · · · · · · · · ·		59
IV. FACILITY CONTACT				Y
A. NAME & TITLE (last, fi	<del>1                                    </del>		NE (area code & no.)	
Erchull, L. D. Senior Envi	ronmental Spe	<del></del>	257 7761	
V. FACILITY MAILING ADDRESS				
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B. CITY OR TOWN		C.STATE D. Z = CODE		
4 Lemont		'     I 'L     60439 '		
VI. FACILITY LOCATION		क स स स		
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B. COUNTY NAME		45		
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C. CITY OR TOWN	<del></del>	D.STATE E. Z:P CODE	F. COUNTY CODE	
6 Lemont	<u> </u>	IL 60439		

EPA Form 3510-1 (6-80)

VII. SIC CODES (4-digit, in order of priority)		the state of the s	The state of the state of	1.45
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2911 (specify) Petroleum Refi	ning	(specify)		
C. THIRD	111111111111111111111111111111111111111	19 14 - 19	D. FOURTH	
(specify)		s (specify)		
8 14 - 15.		7 19 19 - 19		
III. OPERATOR INFORMATION	: i			
	A. NAME	<del></del>		B. Is the name listed item VIII-A also owner?
The UNO-VEN Company, Chicago	Retinery			YES N
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C. STATUS OF OPERATOR (Enter the appropr			D. PHONE (	area code & no.)
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P = PRIVATE  E. STREET OR P.	9. BOX	<del></del>	10 10 10 10	21 25 - 25
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13)til Street ald New Avende	<del></del>			
P, CITY OR TOWN		G.STATE H. ZIP C		
Lemont		IL 60439	Is the facility located	
	<del></del>	40 41 42 47 -		
EXISTING ENVIRONMENTAL PERMITS				
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	87 G			
	E. OTHER	- 30		
		(apecoyy)	(specify)	
U	1 (4 17 14			
G. MEN'A MERENDOUS Wastes)	E, OTHER	(specify)		
R 9	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		(specify)	
(I. MAP)	6 16 17 18	-74		
the outline of the facility, the location of each treatment, storage, or disposal facilities, and ea water bodies in the map area. See instructions for the	ch well where it inject reprecise requirements  related activiti	ts fluids underground. I	nclude all springs, rivers	and other surface
other miscellaneous prod		,		
CHI. CENTIFICATION and Austractional				
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. NAME & OFFICIAL TITLE (type or print)	B. SIGNATU	SE A	[c. c	ATE SIGNED
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General Manager	1 41	I WIN ! Y		12 22 10
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EPA Form 3510-3 (6-80)

EPA Form 3510-3 (6-80)

J. K. Bassett

General Manager

PAGE 4 OF 5

CONTINUE ON PAGE 5

12 OCT 90



CERTIFIED MAIL
RETURN RECEIPT REQUESTED
P 474 913 706

The UNO-VEN COMPANY
Chicago Refinery
135th Street & New Avenue
Lemont, Illinois 60439-3659

Telephone (708) 257-7761

September 21, 1990

U.S. Environmental Protection Agency RCRA Activities Region 5 P.O. Box A3587 Chicago, IL 60690

Dear Sir or Madam:

Revised RCRA Part A Permit Application - ILD041550567

Attached is a revised RCRA Part A permit application for a surface impoundment located at UNO-VEN, Chicago Refinery which becomes a regulated unit due to the TC Rule.

Very truly yours,

W. F. Busse, Supervisor Environmental Services

Lusse-

LDE/1s

att.

SEP 2 4 1990

U.S. - FNIS

MAILING ADDRESS

FACILITY

LOCATION

## NVIRONMENTAL PROTECTION AGENCY GENERAL INFORMATION

Consolidated Permits Program
(Read the "General Instructions" before starting.)

ILD 041550567 The UNO-VEN Company, Chicago Refinery 135th Street & New Avenue Lemont, Illinois 60439

135th Street & New Avenue Lemont, Illinois 60439

I. EPA I.D. NUMBER

F | ILD 041550567 | D

GENERAL INSTRUCTIONS

if a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill—in area below. Also, if any of the preprinted data is absent (the area to she left of the label space lists the information that should appear), please provide it in the proper fill—in area(s) below. If the label is complete and correct, you need not complete lisms i, III, V, and Vi (except VI-B subject must be completed regerdless). Complete all items if no label has been provided. Refer to 100 the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

### II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to say questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold—faced terms.

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SPECIFIC QUESTIONS		MAB	K'X'	1	SPECIFIC QUESTIONS		MAR	FORM
	YES	HO	ATTACHED	L		YES	MO	FORM ATTACKED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		х		В.	Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or equetic enimal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		Х	:
		17	18	K		19	20	24
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or 8 above? (FORM 2C)	Х			D.	Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.7 (FORM 2D)	Ĺ	Χ	
A OF B BOOVEY (FORM 2C/	22	73	84	_			26	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	х		Х	г.	Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		Х	
G. Do you or will you inject at this facility any produced	28	20	30	-		- 31	33	20
water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)	14	X	34	H.	Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)	37	X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)	46	х	·	J.	is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)	45	Х	
III. NAME OF FACILITY								
The UNO-VEN Company, Chicago	Ref	ine	ery					
IV. FACILITY CONTACT								
A. NAME & TITLE (last, fi	•				B. PHONE (area code & no.)			
2 Erchull, L. D. Senior Environme					st 708 257 7761			•
V. FACILITY MAILING ADDRESS					42 44 - 48 48 - 51 52 - 55			
3 135th Street and New Avenue		T			48			
B. CITY OR TOWN					C.STATE D. ZIP CODE			: : *
Lemont	1 1	1			L 6 9 4 3 9			
VI. FACILITY LOCATION								
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The UNO-VEN Company, Chicago Refinery  To UNO-VEN Company, Chicago Refinery  To C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box. (f''Other'', specify.)  D. PHONE (eres code 8 p.o.)  F. FEBERAL M. PUBLIC (other then preferred or state)  P. PRIVATE  O - OTHER (specify)  E. STREET OR P. D. SOX  STATUS OF OPERATOR (Enter the appropriate letter into the answer box. (f''Other'', specify.)  A 7 0 8 2 5 7 7 7 6  P. PRIVATE  E. STREET OR P. D. SOX  STATUS OF OPERATOR (Enter the appropriate letter into the answer box. (f''Other'', specify.)  E. STREET OR P. D. SOX  F. CITY OR TOWN  C. LEMONT  EXISTING ENVIRONMENTAL PERMITS  A. NOTES (Discharges to furface Water)  D. PRIS (Alt Emissions from Proposed Sources)  EXISTING ENVIRONMENTAL PERMITS  A. NOTES (Discharges to furface Water)  D. PRIS (Alt Emissions from Proposed Sources)  EXISTING ENVIRONMENTAL PERMITS  A. NOTES (Discharges to furface Water)  D. PRIS (Alt Emissions from Proposed Sources)  EXISTING ENVIRONMENTAL PERMITS  A. NOTES (Discharges to furface Water)  EXISTING ENVIRONMENTAL PERMITS  A. NOTES (Discharges to furface Water)  EXISTING ENVIRONMENTAL PERMITS  A. NOTES (Discharges to furface Water)  EXISTING ENVIRONMENTAL PERMITS  A. NOTES (Discharges to furface Water)  EXISTING ENVIRONMENTAL PERMITS  A. NOTES (Discharges to furface Water)  EXISTING ENVIRONMENTAL PERMITS  A. NOTES (Discharges)  EXISTING ENVIRONMENTAL PERMITS  A. TO SERVED ENVIRONMEN						B. Is the name lists
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tach to this application a topographic map of the area extending to at least one mile beyond property bounderles. The map must show the cuttine of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous west reatment, storage, or disposal facilities, and each well where it injects fluids underground, include all springs, rivers and other surface atter bodies in the map area. See instructions for precise requirements.  L NATURE OF BUSINESS (provide a brief description)  A - Petroleum Refining and related activities.  B - Process crude oil into finished petroleum products such as gasoline, fuel oils and other miscellaneous products.  III. CERTIFICATION (see instructions)  certify under penalty of law that I have personally serviced but an acritic product of the product of th	R			(specif)	")	
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EPA Form 3510-1 (6-80) REVERSE

SEPA

# HAZARDOUS WASTE PERMIT APPLICATION

Consolidated Permits Program

(This information is required under Section 3005 of RCRA.)

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SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T04"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

#### IV. DESCRIPTION OF HAZARDOUS WASTES

- A. EPA HAZARDOUS WASTE NUMBER Enter the four—digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four—digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.
- B. ESTIMATED ANNUAL QUANTITY For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.
- C. UNIT OF MEASURE For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE COD	E METRIC UNIT OF MEASUR	E CODE
POUNDS	KILOGRAMS	K
TONS	METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

#### D. PROCESSES

1. PROCESS CODES:

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes, if more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

- 1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B,C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
- 2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
- 3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous weste.

**EXAMPLE FOR COMPLETING ITEM IV** (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non—listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

	Τ			PA				C. UNIT														D. PROCESSES
LINE	8	/A	ST		D. 10 (e)	QUANTITY OF WASTE		SURE (enter code)			1. PROCESS CODES (enter)											2. PROCESS DESCRIPTION (if a code is not entered in D(I))
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X-2	2 1	7	0	0	2	400		P		1		0	3	D	8	0		7 7				•
X-:	3 1		0	0	1	100		P		7		0	3	D	8	0		7		7		
X-	4 D 0 0 2		2						Т	1						1 1		1		included with above		

Continued from page 2.

NOTE: Photocopy this page before completing if you have more than 26 wastes to list.

Form Approved OMB No. 158-S80004

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IV. I	1				ON OF HAZARDOUS WASTI		<i>(conti</i> i	_	:d)					D. PROCESSES	OC Ecore					
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26	23		<u>_</u>	26	27		36		- 29	27	- 29	27 - 29	27 - 29							

EPA Form 3510-3 (6-80)

including the possibility of fine and imprisonment.



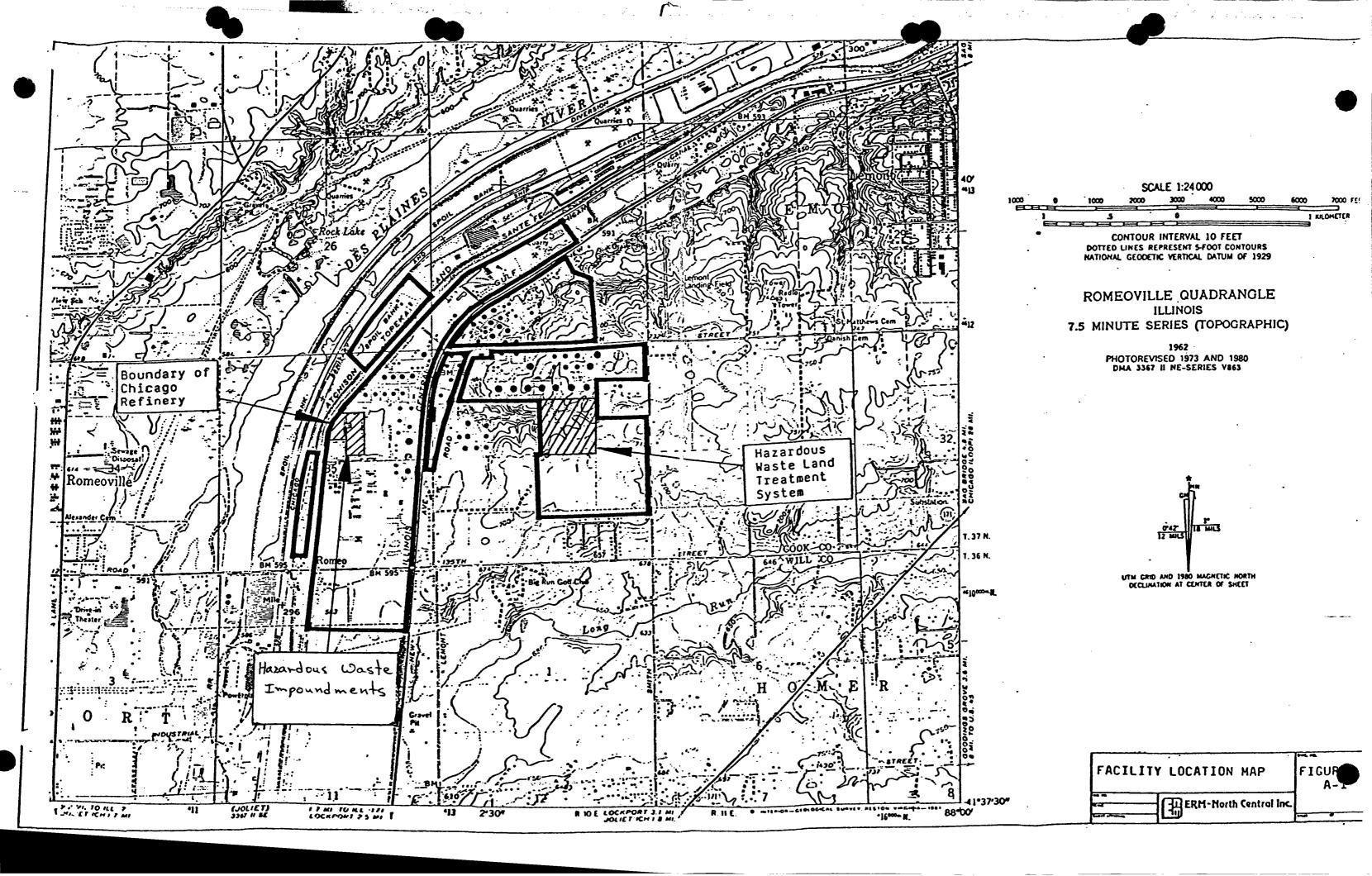
A. NAME (print or type)

L. E. Wilthew

Vice President, Manufacturing

B. SIGNATURE 105 -90

C. DATE SIGNED



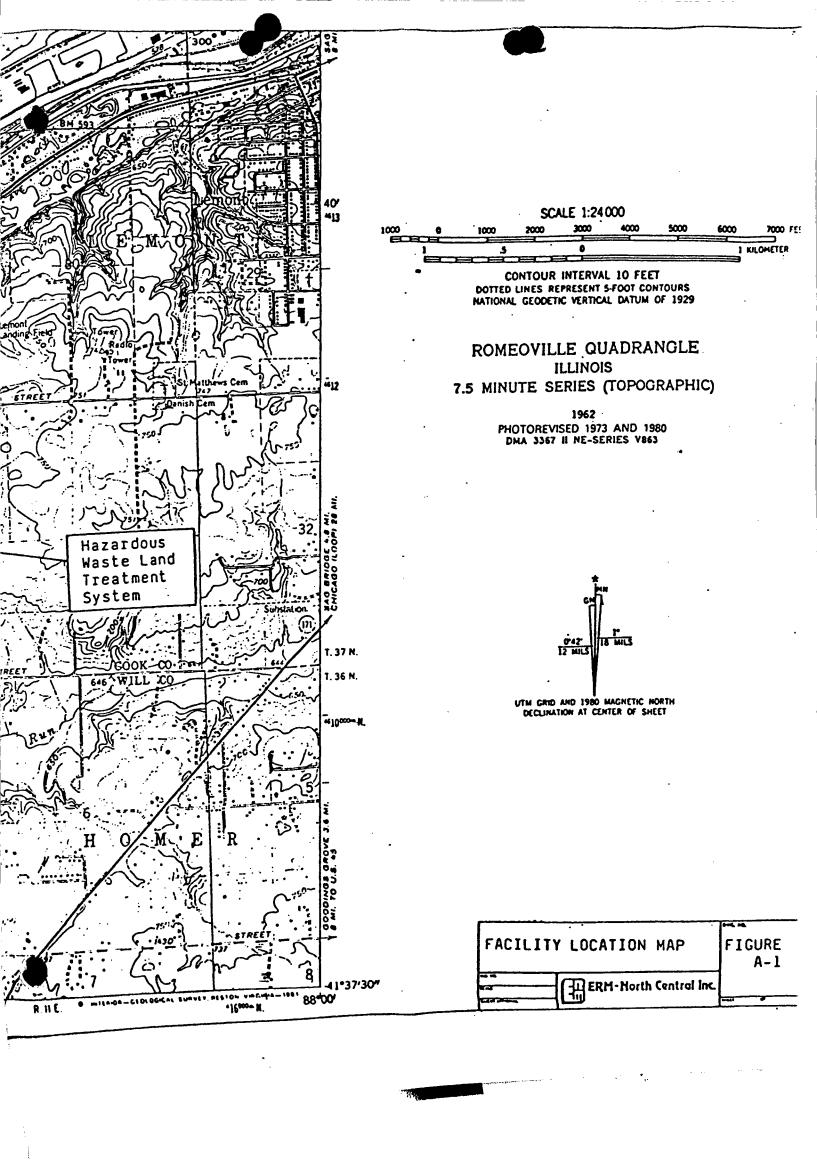


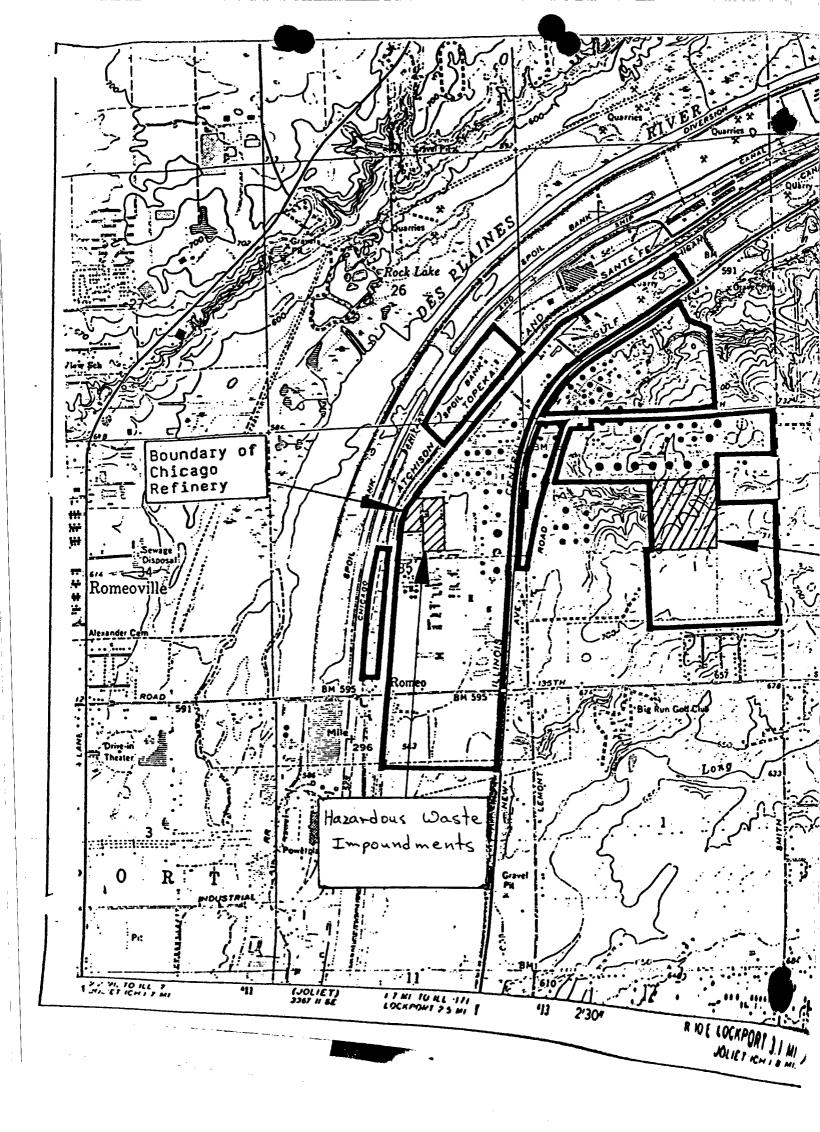


See attached Figures A-1 and A-2

Facility Location Map A-1:

A-2: Facility Base Map







**UNO-VEN**Products

**The UNO-VEN Company** 135th Street & New Avenue Lemont, Illinois 60439

#### Thomas B. Williams

Manager, Chicago Refinery Telephone (708) 257-7761



OFFICE OF COMA
Waste Management Division
U.S. EPA, REGION V

January 12, 1990

Mr. Bernard Killian
IEPA Director
Illinois Environmental
Protection Agency
2200 Churchill Road
Springfield, IL 62706

Groundwater Quality
Assessment Plan

Dear Sir:

CERTIFIED MAIL

P 313 581 796

RETURN RECEIPT REQUESTED

As per Section 725.193(d) (2) Subtitle G: Waste Disposal, we are submitting for your review a Groundwater Quality Assessment Plan for the UNO-VEN, Chicago Refinery Land Treatment Facility.

Should you have any questions concerning the plan, or desire a meeting to discuss the plan, please direct them to L. D. Erchull at the above telephone number.

Very truly vours,

D. W. Denton Superintendent

Health, Environment & Safety

LDE/1s

Attachment

cc: Mr. Jonathan Cooper, USEPA

(fill-in areas are spaced for te type, i.e., 12 characters finch).		Form Approved OMB No. 1	5***RU175						
	NFORMATION	I. EPA I.D. NUMBER		T/A C					
Consolidated	Permits Program	F	<del> ,</del>	D					
GENERAL (Read the "General Ind	ATTACHMENT A	GENERAL INSTR	UCTIONS						
I. EPA I.D. NUMBER	William old II	If a preprinted label has be it in the designated space.	Review the	inform-					
FACILITY NAME	,	ation carefully; if any of it through it and enter the o	correct data	in the					
UNION OIL CO OF CAL	IFORNIA*	`appropriate fill—in area bel the preprinted data is abse	nt (the area	to the					
V. FACILITY NEW AVE & 138TH ST		Verify of the label space lise that should appear), please							
LEMONT, IL 60439		proper fill—in area(s) belo complete and correct, you	w. If the	label is					
	něl	items I, III, V, and VI (a must be completed regard							
VI FACILITY  NEW AVE & 135TH ST  LEMONT, IL 60439  items if no label has been provided, Refer to the instructions for detailed hem descrip-									
the instructions for detailed frem detailed									
		Wilkin data data is conscited.	e Temp Against St	કેર્વે છે સંક્રેલ					
II. POLLUTANT CHARACTERISTICS INSTRUCTIONS: Complete A through J to determine whether you	s peed to exhaut any permit application	forms to the EDA If you and	wer "vee" tr	1 20V					
questions, you must submit this form and the supplemental form is	ited in the parenthesis following the que	stion. Mark "X" in the box in	the third col	umn					
if the supplemental form is attached. If you answer "no" to each quality	uestion, you need not submit any of the	se forms. You may answer "no	" if your act	tivity 🚟					
is excluded from permit requirements; see Section C of the instruction	·	E LOL MENUISIONS OF BOIN-INCER	MARK						
SPECIFIC QUESTIONS	SPECIFIC C			TORM					
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.?		(either existing or proposed) Inimal feeding operation or							
(FORM 2A)		n facility which results in a U.S.? (FORM 2B)	X X	21 . 42					
C. Is this a facility which currently results in diacharges to waters of the U.S. other than those described in	D. Is this a proposed facility	of other than those described	X						
A or B above? (FORM 2C)	waters of the U,S,? (FOR		10 10						
E. Does or will this facility treat, store, or dispose of	municipal effluent below	t at this facility industrial or the lowermost stratum con-							
hazardous wastes? (FORM 3)	taining, within one qua underground sources of d	rter mile of the well bore, rinking water? (FORM 4)	X X	33 -					
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface	H. Do you or will you inject	at this facility fluids for spe-							
in connection with conventional oil or natural gas pro- duction, inject fluids used for enhanced recovery of	process, solution mining	ining of sulfur by the Frasch of minerals, in situ combus-							
oil or natural gas, or inject fluids for storage of liquid	(FORM 4)	overy of geothermal energy?	X						
hydrocarbons? (FORM 4)  1. Is this facility a proposed stationary source which is		d stationary source which is	37 38	30					
one of the 28 industrial categories listed in the in- structions and which will potentially emit 100 tons	instructions and which w	strial categories listed in the ill potentially emit 250 tons							
per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an	Air Act and may affect o	ant regulated under the Clean or be located in an attainment	X						
attainment area? (FORM 5)  III. NAME OF FACILITY	area? (FORM 5)		43 44	45					
<u>e</u>	ITF: CHICAGO								
1 SKIP UN I O N O IL C O D F . CA	LIF.: CHICAGO	RE F. IN E RY	40						
IV. FACILITY CONTACT  A. NAME & TITLE (last, first, & title)		PHONE (area code & no.)							
	<del></del>								
19 16	VI R. SE RV. 31	2 2 5 7 7 7 61							
V. FACILITY MAILING ADDRESS									
A. STREET OR P.O. BOX									
3 1 3 5 th STREET & NEW AV	ENUE								
B. CITY OR TOWN	C.STATE D. ZIP COD			•					
4 L E M O N T		9							
VI. FACILITY LOCATION	40 41 45 41								
A. STREET, ROUTE NO. OR OTHER SPECIFIC ID	ENTIFIER	<del> </del>		•					
51.35.th S.T.R.E.E.T. & N.E.W. A.V	ENUE								
B. COUNTY NAME	49								
<del></del>	<del></del>								
W.I.L.L.	70								
C. CITY OR TOWN	D.STATE E. ZIP COD	F. COUNTY CODE (if known)							
6 L E M O N T	IL6043	9 [ ]							
EPA Form 3510-1 (6-80)	40 42 47 -	92 - 94	ILIE ON REV	VERSE					

CONTINUED FROM THE FRONT		
VII. SIC CODES (4-digit, in order of priority)		
A. FIRST		B. SECOND
7 9 1 1 Petroleum Refining	7 (specify)	A-1
C. THIRD	(Specily)	D. FOURTH
7 (specify)	(specify)	
VIII. OPERATOR INFORMATION		
	IAME	B. Is the name listed Item VIII-A also owner?
8 UNION OIL CO. OF CALI	F.; CHICAGO RE	FINERY YES NO
C. STATUS OF OPERATOR (Enter the appropriate letter int	to the answer box; if "Other", specify.)	D. PHONE (area code & no.)
F = FEDERAL M = PUBLIC (other than federal or state) S = STATE O = OTHER (specify) P = PRIVATE	P (specify)	A 3 1 2 2 5 7 7 7 6 1
E. STREET OR P.G. BOX		[15] [10 - [10] [10 - 21] [12 - 20
135th STREET & NEW AV	/ ENUE	and the second of the second
F. CITY OR TOWN	G.STATE H. ZIP COL	E IX. INDIAN LAND
B <sub>I_</sub> , E, M, O, N, T,	I L 6,0,4,3	Is the facility located on Indian lands?  YES NO
19 16	- 15°- 40 41 42 47 -	52
X, EXISTING ENVIRONMENTAL PERMITS		
	ir Emissions from Proposed Sources)	
9 N I,L,0,0,0,1,5,8,9, , , 9 P	30	
B. UIC (Underground Injection of Fluids)	E. OTHER (specify)	
9 0		pecify)
C. RCRA (Hazardous Wastes)	E. OTHER (specify)	
3	(SE	pecify)
XI. MAP	10	
Attach to this application a topographic map of the area ex the outline of the facility, the location of each of its exist treatment, storage, or disposal facilities, and each well who water bodies in the map area. See instructions for precise real XII. NATURE OF BUSINESS (provide a brief description)	ting and proposed intake and dischard ere it injects fluids underground. Inc	ge structures, each of its hazardous waste
A - Petroleum refining and related acti	ivities.	
B - Process crude oil to finished petro other miscellaneous products.	oleum products such as gas	soline, fuel oils, and
I certify under penalty of law that I have personally examinate attachments and that, based on my inquiry of those personapplication, I believe that the information is true, accurate false information, including the possibility of fine and impri	sons immediately responsible for obt e and complete. I am aware that ther	taining the information contained in the
	S. SIGNATURE	C. DATE SIGNED
a. J. Eliskalns, Manager Chicago Refinery		7-13-84
COMMENTS FOR OFFICIAL USE ONLY		
	111111111111	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		33
PA Form 3510-1 (6-80) REVERSE		

				type in the unshade re spaced for elite ty		aracters/inch).					Form Approved C	OMB No. 158-S8000	14		
F	OR ¶	M	Ω	EPA	U.S HAZAF	RES S WAS	NTAL PRO	RMIT A	PPLICA		I. EPA I.D. NU	MBER	Y/A C		
R	U ICR	A	7	CLA	(This in	Consolid formation is req	ated Permi uired under	_		CRA.)	FILDO	4 1 5 5 0 5	6 7 1		
_				IAL USE ONLY								<u> </u>			
			VED	(yr., mo., & day)						OMMENT	5		<del></del>		
		23		24 2	•							A -	ス		
_				R REVISED APPL											
rev	vi se	d ap	plica	n the appropriate bo tion. If this is your i ber in Item I above.	x in A or B be first applicatio	low <i>(mark one L</i> in and you alread	ox only) to dy know yo "	o indicate our facilit	e whether ty's EPA I.	this is the f .D. Number	irst application you are s r, or if this is a revised ap	submitting for your optication, enter you	facility or a r facility's		
A.	-	X) 1		PPLICATION (place)		ns for definition					2.NEW FACILI	ITY (Complete item			
υlo	C VR. MO. DAY FOR EXISTING FACILITIES, PROVIDE THE								PATE (yr., mo., & day)  OATE (yr., mo., & day)  VR.   MO.   DAY   (yr. mo., & day) OPER						
& <u>=</u> 18i	1			1 1 0 9 (use 75 74 77 79 APPLICATION	the boxes to		olete Item 1	I above)	<del></del>	<del></del>	73 74 75 76	EXPECTED			
		72		CILITY HAS INTER							2. FACILITY H	IAS A RCRA PERM	IT		
_				SES – CODES A					_	· · ·		•			
	en: de:	terin scrib	ng co ne the	des. If more lines are e process (including i	e needed, ente its design capa	r the code <i>(s)</i> in city) in the spac	the space p e provided	orovided. on the fo	If a proce orm (Item	ss will be u ///-C/.	ss to be used at the facilit sed that is not included i				
В.	1.	AM	NUO	DESIGN CAPACITY IT — Enter the amou F MEASURE — For	ınt.				•	-	s. nit measure codes below	that describes the u	nit of		
				used. Only the unit	ts of measure t	hat are listed be	low should								
			PF	ROCESS	CESS ME	PROPRIATE UI ASURE FOR P DESIGN CAPA	ROCESS			ROCESS		APPROPRIATE UN MEASURE FOR PR DESIGN CAPAC	OCESS		
S	tor	age:		TOMESO	ODDL	DESIGN CALA	<u> </u>	Tr	setment:	HUCESS	CODE	DESIGN CAPAC			
т	'AN	IK		t (barrel, drum, etc.)	SO2 GAL	LONS OR LITE			NK	<b>-</b>	LI	ALLONS PER DAY			
			PILE :E IN	IPOUNDMENT	CUB	IC YARDS OR IC METERS LONS OR LITE	RS		SURFACE IMPOUNDMENT TO2 GALLONS PER DAY OR LITERS PER DAY INCINERATOR TO3 TONS PER HOUR OR						
_	)isp	osal	<u>.                                    </u>								M G.	ETRIC TONS PER I ALLONS PER HOU	HOUR;		
		DF		WELL	D80 ACR	LONS OR LITE E-FEET (the vo d cover one acre	lume that	OT the	LITERS PER HOUR  OTHER (Use for physical, chemical, TOA GALLONS PER DAY OR thermal or biological treatment LITERS PER DAY						
	A 84		DØ(	ICATION	depti HEC	h <i>of one foot) O</i> TARE-METER	R	pro sur	processes not occurring in tanks, surface impoundments or inciner-						
0	CE	AN	DISF	POSAL	D82 GAL Lite	ES OR HECTA: LONS PER DA' RS PER DAY LONS OR LITE	YOR		ators. Describe the processes in the space provided; Item III-C.)						
_					UNIT OF					JNIT OF			UNIT OF		
_		T OF		ACUDE	MEASURE	UNIT	)F MEASU	IRE	MEASURE MEASUR						
L		UNIT OF MEASURE CODE UNIT OF MEASURE CODE UNIT OF MEASURE CODE													
C	GALLONS G LITERS PER DAY V ACRE-FEET A LITERS D HECTARE-METER F CUBIC YARDS Y METRIC TONS PER HOUR W ACRES B									V	ACRE-FEET		A		
C	UB UB	LOI ERS IC Y	ARI	os	G L Y	TONS ( METRI Gallo	PER HOUF IC TONS PI ONS PER H	R ER HOUI	R	V D W	ACRE-FEET HECTARE-MET ACRES	TER	A F B		
C G EX	UB UB AL	LOI ERS IC Y IC M	ARI ARI S PI	DS	G L Y C U	TONS : METRI GALLO LITER in line number.	PER HOUF IC TONS PI ONS PER HOUS S PER HOUS S X-1 and 2	R ER HOUI IOUR UR X-2 below	, R	V D W E H	ACRE-FEET HECTARE-MET ACRES HECTARES	TER	A F B Q		
EX oth	UB UB AL	LOI ERS IC Y IC M	ARI ARI S PI	PSERSER DAYR COMPLETING IT	G L Y C U	TONS METRI GALLO LITER in line number in incinerator th	PER HOUF IC TONS PI ONS PER HOUS S PER HOUS S X-1 and 2	R ER HOUI IOUR UR X-2 below	, R	V D W E H	ACRE-FEET HECTARE-MET ACRES	TER	A F B Q		
C G EX	UB UB AL AM er c	LOI ERS IC Y IC M	ARI ARI S PI	PROMPLETING IT 400 gallons. The fac	G L Y C C U EM III (shown:	TONS METRI GALLO LITER in line number	PER HOUF IC TONS PI ONS PER HOUS S PER HOUS S X-1 and 2	R ER HOUI IOUR UR X-2 below	, R	V D W E H lity has two	ACRE-FEET HECTARE-MET ACRES HECTARES  Distorage tanks, one tank	ren	A F B Q		
EX oth	AL AM er c	LOT IC Y IC M ILOT IPLE an h	ARI METE NS PI FOID	PSERSER DAYR COMPLETING IT	G L Y C C U EM III (shown:	TONS METRI GALLO LITER In line number In incinerator th	PER HOUF C TONS PI DNS PER HO S PER HOU S X-1 and A at can burn	ER HOUI HOUR UR X-2 belov n up to 20	N): A faci	V D W E H lity has two	ACRE-FEET HECTARE-MET ACRES HECTARES	can hold 200 gallor	A F B Q		
EX oth	AL AM er c	LOP ERS IC Y IC M LOP IPLE can b	ARI METE NS PI FO nold	DS ER DAY R COMPLETING IT 400 gallons. The fac D U P B. PROCESS	EM III (shown:	TONS METRI GALLO LITER in line number in incinerator th	PER HOUF C TONS PI DNS PER HOS S X-1 and A at can burn FOF OFFIC USE	R	A. PRO	V D W E H lity has two	ACRE-FEET HECTARE-MET ACRES HECTARES  Distorage tanks, one tank	can hold 200 gallor	FOR OFFICIAL USE		
EX oth	AL AM er c	PRECES	ARI METE FO noid	D U P  B. PROCESS	EM III (shown iiity also has a	TONS METRI GALLO LITER In line number In incinerator the APACITY  2. UNIT OF ME. SURE (enter code)	PER HOUF C TONS PI C TONS PER HO S PER HOU S X-1 and A at can burr FOFFIC OFFIC USE ONL	R	A. PRO CESS CODE (from lis above)	V D W H lity has two	ACRE-FEET HECTARE-METACRES HECTARES Distorage tanks, one tank	can hold 200 gallor CAPACITY  2. UNIT OF MEA- SURE (enter code)	FOR OFFICIAL USE ONLY		
EX oth	AL AM	ILON ERS IIC Y ILON IPLE IPLE COD From	ARI METE NS PI FO nold	D U P  B. PROCESS	EM III (shown illity also has a page 13 14 13 is DESIGN C	TONS METRI GALLO LITER In line number In incinerator the	PER HOUF C TONS PI DNS PER HOS S X-1 and A at can burn FOF OFFIC USE	R	A. PRO CESS CODE	V D W H lity has two	ACRE-FEET HECTARE-METACRES HECTARES Distorage tanks, one tank	CAPACITY  2. UNIT OF MEA- SURE (enter code)	FOR OFFICIAL USE		
EX oth	A AM er c	PRECESSOOD	ARI HETE NS PI FO Hold	DS	EM III (shown iiity also has a page of the	TONS METRI GALLO LITER in line number in incinerator the APACITY  2. UNITOR ME. SURE (enter code)	PER HOUF C TONS PI C TONS PER HO S PER HOU S X-1 and A at can burr FOFFIC OFFIC USE ONL	R	A. PRO CESS CODE (from lis above)	V D W H lity has two	ACRE-FEET HECTARE-METACRES HECTARES Distorage tanks, one tank	can hold 200 gallor CAPACITY  2. UNIT OF MEA- SURE (enter code)	FOR OFFICIAL USE ONLY		
EX C S S S S S S S S S S S S S S S S S S	A AM er c	PRECESSON	ARITE PO	D U P  B. PROCESS  1. AM (spec	EM III (shown iiity also has a page of the	TONS METRI GALLO LITER in line number in incinerator the property of ME. SURE (enter code)	PER HOUF C TONS PI C TONS PER HO S PER HOU S X-1 and A at can burr FOFFIC OFFIC USE ONL	R	A. PRO CESS CODE (from lis above)	V D W H lity has two	ACRE-FEET HECTARE-METACRES HECTARES Distorage tanks, one tank	can hold 200 gallor CAPACITY  2. UNIT OF MEA- SURE (enter code)	FOR OFFICIAL USE ONLY		
Exth SON WINNER X-1	AM er c	PRECESSON	ARLINETE FOR THE PORT OF THE P	DUP  B. PROCESS  1. AM (spec	EM III (shown iiity also has a page of the	TONS METRI GALLO LITER in line numbers in incinerator the property of the control of ME. SURE (enter code)	PER HOUF C TONS PI C TONS PER HO S PER HOU S X-1 and A at can burr FOFFIC OFFIC USE ONL	R	A. PRO CESS CODE (from lis above)	V D W H lity has two	ACRE-FEET HECTARE-METACRES HECTARES Distorage tanks, one tank	can hold 200 gallor CAPACITY  2. UNIT OF MEA- SURE (enter code)	FOR OFFICIAL USE ONLY		
EX STANFORM	AM er c	PRECESSON	ARLINETE FOR THE PORT OF THE P	DUP  B. PROCESS  1. AM (spec	EM III (shown iiity also has a page of the	TONS METRI GALLO LITER in line number in incinerator the APACITY  2. UNITOR ME. SURE (enter code)  27	PER HOUF C TONS PI C TONS PER HO S PER HOU S X-1 and A at can burr FOFFIC OFFIC ONL	R. HOUR UR X-2 belove in up to 20  RIAL WY Y 5	A. PRO CESS CODE (from lis above)	V D W H lity has two	ACRE-FEET HECTARE-METACRES HECTARES Distorage tanks, one tank	can hold 200 gallor CAPACITY  2. UNIT OF MEA- SURE (enter code)	FOR OFFICIAL USE ONLY		
EXT. BARNON X-1	AM er c	PRECESSON	ARLINETE FOR THE PORT OF THE P	DUP  B. PROCESS  1. AM (spec	EM III (shown iiity also has a page of the	TONS METRI GALLO LITER in line number in incinerator the APACITY  2. UNITOR ME. SURE (enter code)  27	PER HOUF C TONS PI C TONS PER HO S PER HOU S X-1 and A at can burr FOFFIC OFFIC ONL	R	A. PRO CESS CODE (from lis above)	V D W H lity has two	ACRE-FEET HECTARE-METACRES HECTARES Distorage tanks, one tank	can hold 200 gallor CAPACITY  2. UNIT OF MEA- SURE (enter code)	FOR OFFICIAL USE ONLY		

III. PROCESSES (continued)

C. SPAGE FOR ADDITIONAL PROCESS CODES INCLUDE DESIGN CAPACITY.

R DESCRIBING OTHER PROCESSES (code "7

FOR EACH PROCESS ENTERED HERE

A-3

IV.	DESCRI	PTION	OF HAZ	ARDOUS W <i>A</i>	STES

- A. EPA HAZARDOUS WASTE NUMBER Enter the four—digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four—digit number/s/ from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.
- B. ESTIMATED ANNUAL QUANTITY For each listed weste entered in column A estimate the quantity of that weste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste/s/ that will be handled which possess that characteristic or contaminant.
- C. UNIT OF MEASURE For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE CODE	METRIC UNIT OF MEASURE CODE
POUNDSP	KILOGRAMS.,,K
TONS	METRIC TONS

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

## D. PROCESSES

1. PROCESS CODES:

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code/s/ from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

- 1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B,C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
- 2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
- 3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

**EXAMPLE FOR COMPLETING ITEM IV** (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non—listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

l		Α.						C. UNIT													D. PROCESSES
LINE NO.	W		3T	E١	D. 10 e)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	OF MEA- SURE (enter code)		RE 1. PROCESS CODES				ES			2. PROCESS DESCRIPTION (if a code is not entered in D(1))					
X-1	K		0	5	4	900		P	T	' (	) 5	3/1	י ס	8	0	1	Ţ		1	7	
X-	Τ_	)	9	0	2	400		P	7	' (	) 3	3 1	ם	8	0	1	T			7	·
X-3	L	0	9	0	1	100		P	T	<u> </u>	) 3	7 /	D .	8	0	1	1		Т	1	
X-4	L		0	0	2					Τ-	)		-1						T	7	included with above

Contin NOTE	ued :^ <i>Ph</i>	fro oto	m p	age y th	2. his page before completing if yo	ou h	mor	e th	an 26	o wa					d OMB No. 158-S80004
1	Т	T		T	BER (enter from page 1)						F:	OR OFFI	CIAL USE	THE	1 A-4/
V. I	L	D	0	4	1 5 5 0 5 6 7 1	Λ΄		V	V 2			DUP		2 DUP	/ / / / / / /
IV.	T				ON OF HAZARDOUS WAS		(cont	_	ed)	$\geq$			<u>-</u> .	D. PROCESSES	
2	н.	A. I Az.	ΔR	ח	B. ESTIMATED ANNUA QUANTITY OF WASTE	LO	FME/ SURE (enter	`_	<del></del>		ı. PROCI	SS CODE		2. PROCES	SS DESCRIPTION
Z O	(e	nter	co		21		code)	1	7 -		(ei	iter)	R7 - R9	1	not entered in D(1))
1	K	0	5	]	13 Dry Tons		T			1		' '	' '	API Separator S	
2	<sub>K</sub>	0	/	9	Unknown		$ _{T} $	٦	'' 8		الم			Slop Oil Emulsi waste to be tre	
3	T			П					1	†	<del></del>	1-1-1-	1		wastes; possibly
-	10	0	0	1	150/Dry Tons	+	╀┼	10	8 (	1	-1 1	<del>                                     </del>	+	ignitible	
4						_	11	$\downarrow$			- I - E -	ļ.,	<del>                                     </del>		
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13		7				+		+	<del></del>		<del>-1-1-</del>	1	<del>                                     </del>		
14		-		-			-	+	1 1	$\dashv$	<del>} 1</del>		1 1		
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20				_		+	$\vdash$	+	1 1	+	1 1		<del>                                     </del>		
21	Н			+		+		+	Т ;	$\dashv$	7.7		<del>                                     </del>		
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47	-	+	-	$\dashv$	<del></del>		-	-	1 1	+	11	1 1			· · · · · · · · · · · · · · · · · · ·
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26 EPA F	2,3	25		20 1		,	36	27		29	·		27 - 29		CONTINUE ON REVERSE

IV. DESCRIPTION OF HAZARDOUS WASTES (co	ntinued)	
E. USE THIS SPACE TO LIST ADDITIONAL PRO	CESS CODES FROM ITEM D(1) ON PAGE	3.
	•	
	القي	
EPA I.D. NO. (enter from page 1)		
FILD041550567 6		
1 2 10 15		
V. FACILITY DRAWING		
All existing facilities must include in the space provided on	page 5 a scale drawing of the facility (see instruction	ns for more detail).
VI. PHOTOGRAPHS		
All existing facilities must include photographs (aeri	ial or ground-level) that clearly delineate all	existing structures; existing storage,
atment and disposal areas; and sites of future stor	rage, treatment or disposal areas <i>(see instructi</i>	ons for more detail).
VII. FACILITY GEOGRAPHIC LOCATION		
LATITUDE (degrees, minutes, & seconds	) LONGITU	DE (degrees, minutes, & seconds)
41130100	·	
- 44 1 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	72	- 74 75 76 75 79
VIII. FACILITY OWNER		
A. If the facility owner is also the facility operator as	listed in Section VIII on Form 1, "General Informa	tion", place an "X" in the box to the left and
skip to Section IX below.	•	
R. If the facility owner is not the facility operator as I		
	isted in Section VIII on Form 1, complete the folia	owing items:
	isted in Section VIII on Form 1, complete the folio	· · · · · · · · · · · · · · · · · · ·
1. NAME OF FACIL	isted in Section VIII on Form 1, complete the folio	wing items:  2. PHONE NO. (area code & no.)
1. NAME OF FACIL		· · · · · · · · · · · · · · · · · · ·
		· · · · · · · · · · · · · · · · · · ·
1. NAME OF FACIL E III. 13. STREET OR P.O. BOX	LITY'S LEGAL OWNER  4. CITY OR TOWN	2. PHONE NO. (area code & no.)
1. NAME OF FACIL E III. 13. STREET OR P.O. BOX	LITY'S LEGAL OWNER	2. PHONE NO. (area code & no.)
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A-6

See Attached Figures A-1 and A-2.

A-1: Facility Location Map

A-2: Facility Base Map

1 5 NOV 1983

CERTIFIED MAIL

Fr. F.D. Haas, Supervisor Environmental Services Union Gil Company of California Chicago Refinery 136th Street & Mew Avenue Lemont, Illinois 60439

> PE: Union Oil Company of California Chicago Pefinery 135th Street & New Avenue Lemont, Illinois 50439 ILD 041550567

Pear Mr. Maas:

By now you should have received an acknowledgement of our receipt of the Part A permit application material for the above-referenced hazardous maste facility under the Resource Conservation and Recovery Act (RCRA) permit program.

Accordingly, this letter constitutes the next step in the formal process leading toward issuance or denial of a BCMA permit. Under the authority of 40 CFR 270.10, this is a formal request for submittal of Part 8 of the permit application for the above-referenced facility.

Foclosed are parts of 40 CFR 270, which list the items required for submitting the Part B permit application for the facility. The Part B application must be submitted in quadruplicate and postmerked no later than May 31, 1984. Please uniquely number each page of the application including all attachments (maps, specifications, etc.). A certification statement identical to the one stated in 40 CFR 270.11(d) must accompany the application and all additional submittals. Send your application to the following address:

PCPA ACTIVITIES
Part B Permit Application
U.S. EPA, Region V
U.O. Pox A3587
Chicago, Illinois 60698-3587

We are consisted to consecting the PCDA permitting process as efficiently as possible. Consequently, I suggest you contact Mr. Gale Hruska of my staff, at [212] \$25-2050, as you begin preparing your application. Mr. Hruska will be available to discuss specific needs of your application or to meet with you in thicase. These efforts are intended to generate complete applications, without requiring any leforation beyond that which is necessary to make RCMA parmit decisions.

Failure to furnish the complete Part B permit application by the above date, and to provide in full all required information, is grounds for termination of interim status under 40 CFR 270.10.

Information in the Part B permit application can be disclosed to the public, according to the Freedom of Information Act and U.S. Environmental Protection Agency (U.S. EPA) Freedom of Information regulations. If you wish, however, you may assert a claim of business confidentiality by printing the word "Confidential" on each page of the application which you believe contains confidential business information. U.S. EPA will review business confidentiality claims under regulations in 40 CFR Part 2, and may later request substantiation of such claims. Please review these rules carefully before making a claim.

If you claim parts of your application as confidential, please provide us with a public information copy of the application. The public information copy must be identical to the full application with the exclusion of the confidential information.

We have also enclosed parts of 40 CFP Part 264, which include technical standards for the operation of treatment, storage, and land disposal facilities. These standards will become applicable to your facility upon issuance of a RCRA permit by U.S. EPA. A copy of our "Guidance For Permit Application Preparation" is also enclosed, which will help you in preparing a comprehensive and complete permit application.

We will coordinate review of the application with the Illinois Environmental Protection Agency (IEPA), and will strive for the simultaneous issuance of Federal and State hazardous waste facility permits. It is possible that during the processing of the application, the State hazardous waste program may become authorized to issue PCRA permits for your type of facility. In that case, direct Federal processing will cease, and IEPA in lieu of U.S. EPA will make the final determination on your permit application.

We look forward to receiving your Part B permit application.

Sincerely yours,

Karl J. Klepitsch, Jr., Chief Waste Management Branch

Enclosures: 40 CFR 270 (applicable parts)

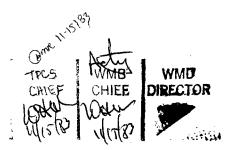
40 CFR 264 (applicable parts)

Guidance For Permit Application Preparation

cc: Robert Kuykendall, IEPA

INITIALS

INITIA



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A - Petroleum refining and related activit	ies. F9: A/51
B - Process crude oil to finished petroleum other miscellaneous products.	m products such as gasoline, fuel oils, and
other miscertaneous products.	
	Established Committee
A NAME & OFFICIAL TITLE (type or print) B. SIGNAT	URE C. DATE SIGNED
R. F. Nootbaar Senior Vice President/Eastern Region	r. nathane 11/6/89
EPA Form 3510-1 (6-80) REVERSE	

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**CONTINUE ON REVERSE** 

PROCESSES (continued)		~.	
PACE FOR ADDITIONAL PROCESS CO ICLUDE DESIGN CAPACITY.	DDES OR FÖR DESCRIBING O	THER PROCESSES (code "T04"). FOR E	ACH PROCESS ENTERED HERE
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## IV. DESCRIPTION OF HAZARDOUS WASTES

- A. EPA HAZARDOUS WASTE NUMBER Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you hendle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number (s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.
- B. ESTIMATED ANNUAL QUANTITY For each listed waste entered in column A estimate the quantity of that weste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste/s/ that will be handled which possess that characteristic or contaminant.
- C. UNIT OF MEASURE For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE CODE	METRIC UNIT OF MEASURE CODE
POUNDSP	KILOGRAMS.,K
TONS	METRIC TONS

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

## D. PROCESSES

1. PROCESS CODES:

For listed hazardous waste: For each listed hazardous waste entered in column A select the code/s/ from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

- 2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.
- NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:
  - 1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B,C, and D by estimating the total ennual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste. In column D(2) on that line enter in column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter
  - "included with above" and make no other entries on that line.
  - 3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

	Τ	A	. E	P.		C.UNIT	1	D. PROCESSES
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X-2	1	7	0	0	2	400 P T 0 3 D 8 0		
X-3	1	)	0	0.	1	100 P T 0 3 D 8 0	•	
X-4		p	0	0	2			included with above

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IV. DESCRIPTION OF HAZARDOUS WAST.  E. USE THIS SPACE TO LIST ADDITIONAL PRO	tinued)	
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EPA I.D. No. (enter from page 1)		
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V. FACILITY DRAWING		
All existing facilities must include in the space provided o	in page 5 a scale drawing of the facility (see instructions )	for more detail), F6 : B/55
VI. PHOTOGRAPHS	bugo o a social agenting out that reading for the social and the social agent	
# 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	erial or ground—level) that clearly delineate all exi	sting structures; existing storage,
All existing facilities must include photographs (ae treatment and disposal areas; and sites of future st	orage, treatment or disposal areas (see instruction	s for more detail). F6: A156
VII. FACILITY GEOGRAPHIC LOCATION		
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VIII. FACILITY OWNER  X A. If the facility owner is also the facility operator a		8 d 3 d 3 d 3 p
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